



## COMPETENT JUNIOR (CJ'S) 16-17 YEARS OLD CONSENTING PARENT ACKNOWLEDGEMENT OF RISK 2016 OPEN WATER SWIMMING at RIPON RACECOURSE LAKE

please tick

1. I acknowledge that my child and I have read, understood and will comply with the NYP Tri Open Water Swimming Rules at Ripon Racecourse Lake.
  
2. I understand that Ripon Racecourse Lake is an unsupervised Open Water Swimming venue and as such I understand that my child is swimming entirely at its own risk, for which I am completely responsible. In the unlikely event of injury, accident, loss or damage suffered, regardless of however it may be caused, no responsibility whatsoever shall be attached to the organisers, landlords, or any persons involved in the organisation of the open water swimming at Ripon Racecourse Lake.
  
3. I hereby certify that my child is physically fit and able to participate in any such training and events and that I do not know of any medical condition, which would make it inadvisable for them to swim in the lake. Furthermore, I am aware of the need to seek appropriate medical advice if I have any concerns as to the state of their health.
  
4. My child and I understand the significant differences between OW swimming and pool swimming, e.g. but not limited to; no rescue options, deep water with no quick access to the sides, cold water, weeds, anxiety, weather conditions etc...
  
5. I declare that my child has suitable previous OW swim experience and that I take full responsibility for allowing them to participate unsupervised.
  
6. I understand NYP's recommended maximum distances relating to different ages of children (shown below) 
  - 15-16 year old - Max 750m
  - 17 year old - Max 1,500m

**By signing this document you are stating that you acknowledge, understand and will comply with the relevant points outlined**

Junior's forename		Junior's Surname	
Junior's Signature			Childs DOB - -
Parent's First Name		Parent's Surname	
Parent's Signature			Today's date - -
Parent's Phone No.			
Health Concerns			

**FOR CLUB USE ONLY:**

Name of person conducting induction		Date induction completed
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Signature .....